

# Iowa CASA Advocate Pre-Service Training

## Iowa Child Advocacy Board

Module I  
Introduction

Personal Study



## Learning Outcomes:

- State the purpose of the CASA pre-service training
- Identify the characteristics of a quality Advocate
- Describe the key concepts of the CASA role
- Identify why Iowa needs good Advocates

## Agenda

1. Welcome and Thank You!
2. What Advocates Do
3. History of CASA / CASA Mission
4. Why Iowa Needs Good Advocates
5. What Makes a Good Advocate
6. Advocate Roles
7. Types of Abuse/Neglect
8. Important Concepts to Know
9. Wrap Up, Evaluation and Preparation for Module 2



## Welcome and Thank You!

Thank you for volunteering to advocate for Iowa's abused and neglected children by becoming a member of Iowa's team of Court Appointed Special Advocates (CASAs). The Iowa Child Advocacy Board (ICAB), who provides oversight for the CASA Program and the Foster Care Review Board (FCRB) Program, welcomes you!

The purpose of the thirty plus hours of training to become an Advocate, which is required by National CASA, is to prepare you for the challenging tasks ahead. You come into this important role with your own unique perspective, your personal and professional experiences and skills, and your passion for children. The training will enhance your skills and experience so that you are an effective advocate for children. This program will help you learn more about the children we serve, about yourself, and the environment where CASA operates. Your pre-service CASA training will follow the sequence outlined below. At the conclusion of each module is an evaluation that you must complete before continuing on to the next module. The purpose of this evaluation is to assess how helpful this material has been for your learning. On completion, your evaluation must be returned to your facilitator.

The CASA Pre-Service Training modules are as follows:

### ➤ **Module 1 Personal Study (1 hour): Introduction**

This module provides a brief overview of CASA and why it is needed; the skills that are required to be an Advocate; and the introduction to the Myers Case Study, which will be integrated into every module of the CASA pre-service training.

### ➤ **Module 2 In-Person (4 hours): Child Advocacy Fundamentals**

This module will focus on key principles and concepts you need to know as an Advocate, pertinent child welfare laws, the juvenile court process and key parties in a juvenile court case, and the documents with which you need to be familiar.

➤ **Module 3 Personal Study (5 hours): Exploring Concepts in Child Advocacy**

In this module, your study time will be spent learning about what it means to be culturally competent and why this is so important for an Advocate to know. You will gain an understanding of the factors affecting families and children, including trauma and the key stressors of poverty, substance abuse, mental illness and domestic violence. This will be an opportunity for you to not only learn the important information you need to know as an Advocate, but also about what influences your own thinking and behavior.

➤ **Module 4 In-Person (first day of 2-day training): Practicing the CASA Role – Children and Communication**

The focus of this module will be on the first steps to understanding a case. This session will provide more information on children's needs and the factors that influence development. In addition, there will be opportunities to practice the communication skills needed to successfully advocate for children.

➤ **Module 5 In-Person (second day of 2-day training): Practicing the CASA Role – Diversity in Families**

This module includes many activities that reinforce our understanding of valuing differences, using a strength-based lens, and major factors that impact the lives of families, including poverty, substance abuse, mental illness and domestic violence. There will be additional opportunities to practice gathering information as an Advocate.

➤ **Module 6 In-Person (6 hours): Putting it All Together**

This module will address many of the specific tasks of an Advocate such as: writing an effective court report; appearing in court; monitoring a case; and keeping records. During the session, participants will fully outline each section of a court report in

preparation for one of their major tasks as an Advocate. This module will also address Program Policies and Procedures and Security Awareness training.



## What does a CASA Advocate do?

An Advocate is a trained community volunteer assigned by a judge to represent the best interests of a child under the court's jurisdiction due to abuse and neglect. An Advocate is required to keep the judge informed about the child's needs and how his/her needs are being met. The Advocate's goal is to see that the child is living in a safe, nurturing place and that everyone is working together to achieve permanency for the child.

*“Serving as a CASA has been a most incredible experience! How often do we say, 'I really want to make a difference' and then continue*

*to sit on the couch? In the CASA program, you really can make a difference. You are provided training and support all the way along. For my money, this commitment is one of the best investments I've ever made. This has been an over-the-top experience."*

- Kay Hooper, CASA Advocate

Click on the link: [Child Advocacy Board CASA Pre-Service Manual](#) to watch ***Become a Court Appointed Special Advocate*** video.

## How Did the CASA Movement Begin?

In 1977, Seattle judge David Soukup, concerned over making drastic decisions about abused and neglected children's lives with insufficient information, conceived the idea of citizen volunteers speaking up for the best interests of children in the courtroom. From that first program has grown a network of nearly 1,000 CASA and guardian ad litem (GAL) programs that are recruiting, training and supporting volunteers in 49 states and the District of Columbia.



All programs have a common purpose of supporting abused and neglected children identified by the courts.

*"As a judge, I had to make tough decisions. I had to decide whether to take a child from the only home he's ever known, or leave him someplace where he might possibly be abused. I needed someone who could tell me what was best for that child from the child's viewpoint. That's what CASA does."*

- CASA Founder David W. Soukup Seattle, WA 1977

In January 1986, under Governor Terry Branstad, Iowa was the 45th state to adopt the CASA program. Under the leadership of Chief Justice Ward Reynoldson, the Iowa CASA program began as a pilot project in six counties, three in northwest Iowa and three in central Iowa. After two years as a pilot project, the judicial branch began expanding the CASA program, and it was active in 30 Iowa counties when the administration of the program was transferred to the executive branch in 2003.

The program has continued to grow, and, at the request of Chief Justice Marsha Ternus and Governor Chester Culver, the 2007 Iowa General Assembly appropriated funds to expand the program statewide. CASA Advocates are now recruited to serve in all of Iowa's 99 counties.

In 2013, ICAB introduced the CASA Coach Model in four pilot sites in Iowa. The purpose of the Coach Model is to serve more neglected and abused children by using seasoned advocates to support, guide and coach other Advocates. Now, in many areas of Iowa, new Advocates are assigned a CASA Coach, in addition to CASA Program Staff.

### **National CASA Mission Statement**

The mission of the National Court Appointed Special Advocate (CASA) Association, together with its state and local member programs, supports and promotes court-appointed volunteer advocacy so that every abused or neglected child in the United States can be safe, have a permanent home, and the opportunity to thrive.

### **Iowa Child Advocacy Board Mission Statement**

The Iowa Child Advocacy Board's mission is advocating for the protection of Iowa's children and improvement of the child welfare system. (This includes oversight, not only to CASA but to Foster Care Review Boards which have been established to improve how permanency is achieved for Iowa's children placed in foster care.)

### **Iowa CASA Mission Statement**

The Iowa Court Appointed Special Advocate (CASA) program commissions trained and qualified community Advocates to serve as an effective voice in court for abused and neglected children, strengthening efforts to ensure that each child is living in a safe, permanent and nurturing home.

### **Why Does Iowa Need Good Advocates?**

At the end of 2014, **5,674 Iowa children** were involved in the court system, primarily because of abuse and neglect. At the same point in time, **only 1,036 children had a CASA assigned.**

The following descriptions document some of the types of situations where CASAs are involved in helping children:

- An infant is beaten by her father because of her incessant crying. She suffers over a dozen fractures.
- A two-year-old is left alone and unsupervised while his eighteen-year-old mother goes on drinking binges.
- A group of four siblings aged from 12 months to 14 years are removed from their parents' home because of the father's illegal drug manufacturing and the mother's lack of adequate parenting skills. The oldest two children had been diagnosed with learning disabilities several years ago.
- A sixteen-year-old has experienced multiple foster care placements due to his acting out behavior. His mother is receiving mental health treatment but is still unable to provide a safe home for her son. They want to be together.

These are just a few types of the thousands of cases with which Iowa's judges and child welfare professionals are faced. Each case is different and is complicated by many factors. Compared to the dozens of cases each social worker, judge, attorney or service provider is responsible, the Advocate is typically assigned just one case at a time. This means the Advocate can offer concentrated attention in a way that others are unable to do, because of their large caseloads.





*“In a world that is so busy, the CASA program gives you the ability to make your time count by seeing and feeling that you are making a difference in the life of a child.” - Shantel Pausley, CASA Advocate*

### Ad-vo-cate – both a noun and a verb:

1. One that pleads the cause of another; specifically: one that pleads the cause of another before a tribunal or judicial court.
2. One that defends or maintains a cause or proposal.
3. One that promotes or supports the interests of another.

Merriam-Webster

### What Makes a Good Advocate?

First of all, a CASA is committed to give his/her time, energy and heart to advocate for children in different circumstances of abuse or neglect. A good advocate invests in gaining specific knowledge, attitudes, and skills to speak effectively on behalf of a child. There are four main components to the Advocate's role: investigation, facilitation, advocacy and monitoring. The intent of the training is to develop your skills in each of these areas.

## CASA Advocate Roles

### I F A M



In addition to skill development, Advocates must have a certain mindset and perspective in order to work effectively with the children, their families and all the people involved in helping.

An Advocate must be:

- ✓ aware of his/her own biases
- ✓ culturally competent
- ✓ empathetic
- ✓ open-minded
- ✓ able to work independently
- ✓ respectful of differences



## Recognizing Child Abuse and Neglect

CASAs are Court Appointed Special Advocates who are trained to advocate for children who come into the court system because of alleged abuse or neglect. The victim of child abuse is a person under the age of 18 who has suffered one or more of the categories of child abuse as defined in Iowa law, such as: physical abuse, mental injury, sexual abuse, denial of critical care, child prostitution, presence of illegal drugs in a child's body, manufacturing or possession of a dangerous substance in a child's presence, bestiality in the presence of a minor, and allowing a child's accessibility to a registered sex offender.

Physical Abuse	
Description	Indicators
Any non-accidental physical injury or injury which is at variance with the history given of it, suffered by a child as the result of the acts or omissions of a person responsible for the care of the child.	<ul style="list-style-type: none"><li>• Unusual or unexplained burns, bruises, or welts</li><li>• Multiple or spiral fractures</li><li>• Injuries in various stages of healing</li><li>• Internal damage or head injury</li><li>• Lacerations or abrasions</li><li>• Injuries not fitting explanation</li><li>• Behavioral changes such as:<ul style="list-style-type: none"><li>• Extreme aggression</li><li>• Withdrawal</li><li>• Afraid to go home</li><li>• Overly concerned for siblings</li></ul></li></ul>
Sexual Abuse	
Description	Indicators
The commission of a sexual offense with or to a child, including but not limited to lascivious acts with a child, indecent exposure, indecent contact with a child, incest, or sexual exploitation of a minor.	<ul style="list-style-type: none"><li>• Age-inappropriate sexual knowledge</li><li>• Sexual acting out</li><li>• Child disclosure of abuse</li><li>• Excessive masturbation</li><li>• Physical injury to genital area</li><li>• Pregnancy or STD at a young age</li><li>• Torn, stained, or bloody underclothing</li><li>• Depression, distress, or trauma</li><li>• Extreme fear</li></ul>

Emotional Abuse	
Description	Indicators
Mental injury to a child's intellectual or psychological capacity as evidenced by an observable and substantial impairment in the child's ability to function within the child's normal range of performance and behavior as the result of the acts or omissions of a person responsible for the care of the child.	<ul style="list-style-type: none"><li>• Habit disorders (biting, rocking, enuresis)</li><li>• Conduct disorders (withdrawal or antisocial behavior)</li><li>• Behavior extremes</li><li>• Overly adaptive behavior</li><li>• Lags in emotional or intellectual development</li><li>• Low self-esteem</li><li>• Depression, suicide attempts</li></ul>
Neglect (Denial of Critical Care)	
Description	Indicators
Failure of a person responsible for the child's welfare to provide adequate food and nutrition, shelter, clothing, medical or other care necessary for the child's health and welfare when financially able to do so or when offered reasonable means to do so.	<p><i>Physical Signs:</i></p> <p>Malnourishment Missed immunizations Lack of dental care Lack of supervision Consistent poor hygiene Constant tiredness/listlessness</p> <p><i>Material Signs:</i></p> <p>Insufficient/improper clothing Filthy living conditions Inadequate shelter Insufficient food/poor nutrition</p>

Please describe your reaction to these descriptions and any personal experiences which help you understand how an abused or neglected child must feel and act:

Please keep in mind that when the Department of Human Services makes a determination as to whether child abuse and/or neglect have occurred, they must look at special factors related to the abuse or neglect. A few of these special factors include:

- The victim must be a child.
- The person responsible for the abuse/neglect was a caretaker for the child at the time of the abuse.
- The child was injured or placed at unnecessary risk.
- The child's caregiver was financially able to meet the needs of the child and failed to do so.
- If injuries occurred, the injury was non-accidental or the history given is at variance with the injury.
- The abuse or neglect resulted from the acts or omissions of the child's caretaker.

## **Important Concepts for CASAs to Know**

This is an introduction to the concepts of Best Interest, Minimum Sufficient Level of Care, Permanency and Concurrent Planning. You will be learning much more about these key concepts during the pre-service training.

### **The “Best Interest” Principle - What It Means**

You will be hearing this term used a lot in meetings and in the court room. Judges use the “best interest of the child” standard when making their decisions in child abuse and neglect cases. There is no concise legal definition for “best interest of the child”. Child welfare, juvenile court practitioners and scholars have debated the meaning of “best interest of the child” for years. It is best described as the following:

- A safe home.
- A permanent home.
- As quickly as possible.

Parents typically decide what is best for their children and then provide it for them to the extent they can. They are their children's best advocates. The child protection system intervenes in families' lives when parents cannot or will not protect, promote and provide for their children's basic needs.

### **Minimum Sufficient Level of Care (MSLC)**

Removing a child from his or her home because of abuse and/or neglect is a drastic remedy. Because removal is so traumatic for the child, both the law and good practice require that agencies keep the child in the home when it is possible to do so and still keep the child safe. Children should be removed only when parents cannot meet the "minimum sufficient level of care." This standard describes what must be in place for the child to remain in his or her home. The same standard is also used to determine whether or not parents have made sufficient progress so that a child can be safely returned to the family home. The minimum sufficient level of care is determined by a number of factors, each of which must be looked at specifically in relation to the case at hand.

Factors to consider include:

#### *The Child's Needs*

**Is the parent providing for the following needs at a basic level?**

- Physical (food, clothing, shelter, medical care, safety, protection).
- Emotional (attachment between parent and child).
- Developmental (education, special help for children with disabilities).



#### *Social Standards*

**Is the parent's behavior within or outside commonly accepted child-rearing practices in our society?**

Here are some examples: In terms of discipline, whipping a child with a belt was generally thought to be appropriate during the first half of the twentieth century, but is now widely considered abusive. Contemporary families

frequently use a short “time out” as a punishment for young children. In terms of school attendance, it is a widely held expectation that parents send all children to school (or home-school them) until they reach the age limit at which attendance is no longer compulsory. Social standards also apply in medical care, where immunizations and regular medical/dental care are the standard.

### *Community Standards*

**Does the parent’s behavior fall within reasonable limits, given the specific community in which the family resides?**

Here are some examples: The age at which a child can be safely left alone varies significantly from urban to suburban to rural communities. The age at which a child is deemed old enough to care for other children is largely determined by cultural and community norms. Even something as simple as sending a 9-year-old child to the store might fall within or outside those standards, depending on neighborhood safety, the distance and traffic patterns, the weather, the child’s clothing, the time of day or night, the ability of the child, and the necessity of the purchase.

Communities can be geographical or cultural. An example of a non-geographical, cultural community is a Native American tribe in which members live in a variety of locales but still share a common child-rearing standard.

### **Permanency: What Is It?**

All children need a “parent”, a primary attachment figure, who will care for them through life’s ups and downs; who protect them and guide them now and into adulthood. In our culture, typically the parents are a father and mother, but one or more other caring adults who are willing to commit unconditionally to the child, can also meet the child’s need for permanency.

One of your primary goals is to advocate for a safe, permanent home as soon as possible, honoring the child’s culture and sense of time. While there is never a guarantee of permanency, having such intentions can ensure that you are working toward a plan that supports it. At a very basic level, permanency is most probable when the legal parent is also the emotional parent, as well as the parenting figure, present in the child’s life.



## Concurrent Planning

Concurrent planning is an approach that seeks to eliminate delays in attaining permanent families for children and youth in foster care. Effective implementation requires comprehensive and early assessment. It involves identifying and working toward a child's primary permanency goal (such as reunification with the birth family), while simultaneously identifying and working on a secondary goal (such as guardianship with a relative). This practice can shorten the time to achieve permanency if efforts toward the primary goal prove unsuccessful, because progress has already been made toward the secondary goal.

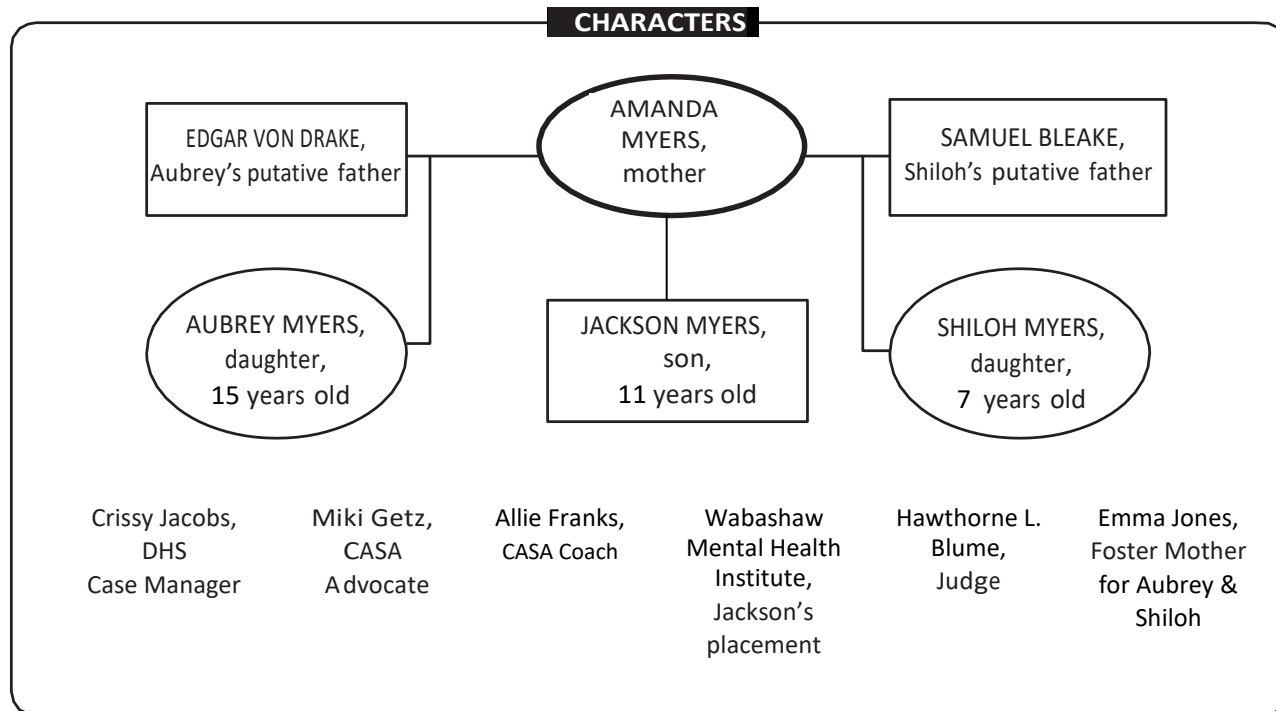


Please go to: [Child Advocacy Board CASA Pre-Service Manual](#) to watch the **ReMoved Video Trailer**. We will follow this story throughout your pre-service training.

## Myers Case Study

In order for you to learn about the families and types of issues you will be addressing as an Advocate, read the case study beginning on the next page regarding the Myers family. You will investigate, facilitate, advocate and monitor the Myers' case throughout your pre-service training.

## The Myers Case



## AMANDA MYERS' STORY



Amanda Myers,  
Mother

I don't know what all the fuss is about. I take care of my kids. I discipline them the way they need to be. It's no one's business but my own how I raise my children. I have a busy schedule. I take care of my dad too.

DHS doesn't know what they are talking about and I told them I didn't do anything wrong to my kids! When Crissy Jacobs came to my home I let her have it! I might not always have money to have extra food in the house but there's food to eat. DHS wants me to have a gambling assessment but I don't know why. It's not like I have a gambling addiction. She thinks I need a substance abuse evaluation too. The casino is a place to go and spend time with adults. It's tough being a single parent of three kids. None of their dads are involved or provide any financial support. I don't even know who Jackson's dad is. Sometimes I take things from stores because I don't have the money to

pay for them. I love my kids; they need to come home and not be in foster care.

## AUBREY'S STORY

Mom left to go to the casino and didn't come home for a couple days. I didn't know why she didn't come home. We did our best to take care of each other but there wasn't much food in the house to eat. I can't get Jackson and Shiloh to school by myself so I stayed home to watch them again. I don't like it when I have to stay home and take care of everybody and miss school. I missed so much school that they failed me last year. I'm tired of always having to take care of Jackson and Shiloh. I never get to do anything else.



**Aubrey Myers,**  
15 yr old

## JACKSON'S STORY

Mom is gone a lot. We don't know where she goes for days. Sometimes she gets mad at us and hits and kicks us. She hits us with a belt. She told us we couldn't tell anyone about it. I help Aubrey take care of Shiloh. There's never any food in the refrigerator or cupboards. I get angry a lot and have to take pills for it. I don't know if it helps, because I still get really mad and don't know why I do the things I do. I don't sleep good at night.



**Jackson Myers,**  
11 yr old son



**Shiloh Myers,**  
7 yr old daughter

## SHILOH'S STORY

Mom is not home much. Aubrey and Jackson take care of me. Sometimes Aubrey gets mad about that and she says mean things to me. That makes me cry. I go to school and like it.



**Samuel Bleake,**  
Shiloh's Putative  
Father

## SAMUEL BLEAKE'S STORY

Despite attempts by the DHS case manager to engage Samuel Bleake in services and establish paternity, Samuel

has not been involved in the case or Shiloh's life.

### EDGAR VON DRAKE'S STORY

I don't even know if Aubrey is mine. She doesn't have my name. I've never done paternity testing. Amanda needs to get her act together and take care of her kids.



Edgar Von Drake,  
Aubrey's Putative  
Father

### CRISSY JACOBS' STORY

I've been a Department of Human Services (DHS) case manager for seven years. Reports were made to DHS Child Protection Services (CPS) because three kids were in a home without an adult. There were also reports that there was no food in the home and Amanda Myers was not in the home for several days during a two week time period, because she had gone gambling and drinking. I knew DHS had an open case for four months, under voluntary services, on the family. Through voluntary services, we had been addressing financial concerns as well as concerns regarding excessive physical discipline and mother's alcoholism. There is also a history of Amanda Myers moving frequently and being kicked out of local shelters in town due to her aggressive behavior, as well as her lack of supervision regarding the children.

When I met with Amanda to discuss the new allegations she became very agitated and upset. She began yelling and screaming at me, and at the children. She denied that she had physically disciplined the children for quite some time. The children were removed on June 28<sup>th</sup>.

The Application for Temporary Removal, which was presented to the Judge, asserted: "On June 16, 2006 allegations of physical abuse regarding all of the children were received by the Child Protective Services Office. This has been verified by two collateral sources. The family is frequently without food due to the mother's gambling problem. Aubrey is left several



Crissy Jacobs,  
DHS Case Manager

days a week to care for the younger children as well as her nieces and nephews. Jackson has had several police contacts due to lack of supervision. The children appear to be in imminent danger due to their mother's inability to supervise and care for the children. The Temporary Removal Hearing is set for July 5<sup>th</sup>.

I contacted the county attorney requesting he file a Child In Need Of Assistance (CINA) petition. It was filed on June 30<sup>th</sup> and asserted the legal grounds for bringing the children under the court's jurisdiction as: the parent has abandoned or deserted the children; the parent has physically abused or neglected the children or is imminently likely to abuse or neglect the child; and the child has suffered or is likely to suffer harmful effects as a result of the failure of the children's parent to exercise a reasonable degree of care in supervising the children.

In layman's terms the factual allegations are: the children are in need of the court's assistance due to their mother's chronic gambling problems, being left alone for days at a time and physical abuse perpetrated by their mother. Amanda Myers is the mother of Aubrey Myers (DOB: 04/07/1991), Jackson Myers (DOB: 06/15/1995), and Shiloh Myers (DOB: 09/10/1999). Aubrey's putative father is Edgar VonDrake. Shiloh's putative father is Samuel Bleake. Jackson's putative father is unknown. Amanda has not been married to any of the putative father, paternity has not been established and the fathers are not involved in the lives of the children.

Amanda Myers and her children have been receiving voluntary services from the Department of Human Services since February of 2006. Since that time there have been major issues regarding financial problems as well as concerns regarding excessive physical discipline. Madilynn Malow, Principal of Johnson Elementary School, has been a constant source of support both emotionally and financially for the children for several years. Ms. Malow has frequently provided financially through the purchase of clothing, groceries, and payment of back bills for the family. In addition, Ms. Myers has a history of moving frequently and has been kicked out of the local shelters in Wabashaw due to her aggressive behavior, as well as her lack of supervision regarding the children.

On 6-16-06 the Child Protective Services Unit did receive allegations of physical abuse regarding all of the children. The CPS investigator did



attempt to address those concerns with the children and Ms. Myers. Ms. Myers became very agitated and upset regarding the allegations. She began yelling and screaming at the worker, as well as the children, when the allegations were brought to her attention. She denied that she had physically disciplined the children. The CPS investigator would note that she was contacted by two collaterals who stated that the children have shared with them that they have been physically disciplined in the recent past and been threatened if they talked about that discipline to anyone outside the family. During the week of 6-19-06, as well as 6-26-06, it was reported that the family had no food in the home; several days during that time frame Ms. Myers was not available to care for the children because she was gone gambling. It does appear that Ms. Myers has not made good choices in regards to her children and they continue to be at risk for physical abuse, as well as denial of critical care, and failure to provide proper supervision.

Also filed was a Motion for Hearing on the Applicability of the Indian Child Welfare Act (ICWA) asking that the Court determine whether the Indian Child Welfare Act is applicable to this case. Both the hearing on the CINA Petition and ICWA will be held on July 31<sup>st</sup>.



Miki Getz,  
CASA Advocate

**CASA  
Trainee**

My name is Miki Getz. I am currently going through CASA Advocate Training. While I have learned a great deal, I am still a bit concerned about my ability to grasp all this information and keep it all straight. I do find it very interesting – the law, how the system operates, and the different community agencies involved. There is comfort in the assurance that CASA staff is going to be there to support us in our work.

I find the situations they describe ~ the children they talk about ~ the stories that are shared ~ heartbreaking. But I am encouraged when I think that there are people who are interested in helping these kids and they really can make a difference in the life of a child. I am hopeful that the work I do will give a child hope.

I don't yet know who my CASA kids will be, but I understand that there is a case going on right now that needs a CASA Advocate, and I may be a good match for them. I am anxious to get started.

Throughout your pre-service training, you will be learning more about these individuals and their situations. You will also learn about the challenges and rewards of being a CASA Advocate.

THANK YOU for helping the Iowa Child Advocacy Board achieve it's mission ~ an advocate for every child. We are excited to have you as part of the CASA team. There are children waiting for you to lift your voice, to lift the life of a child.

Your next training module is a four hour face-to-face session where you will interact with other new Advocates. You will learn more about your role as an Advocate, the expectations for Advocates in this process, how the juvenile court process works, and about the key parties with whom you will be working.

**Please complete the evaluation of the first pre-service training module on the following page and return to your Coordinator.**



After your Coordinator receives the completed evaluation, you will be provided with a copy of the Myers Case Study to begin reading prior to attending the in-person session. This is your Case Study, so feel free to use it as you wish while learning about the Myers family.

**Upon receiving the Myers Case Study, please read pages 1-71 to become more familiar with the case.**

**Page intentionally left blank for evaluation to be removed and submitted to Local Coordinator.**



## Evaluation Module 1

Please complete this evaluation of the first pre-service training module. Did you learn what was intended? (6 is high and 1 is low)

Learning Outcomes	Ratings					
	6	5	4	3	2	1
1. State the purpose of the pre-service training						
2. Identify the characteristics of a quality CASA						
3. Describe the key concepts of the CASA role						
4. Identify why Iowa needs good CASAs						

Four key things that I learned:

1.

2.

3.

4.

After this one hour session, the main questions I have about CASA are:

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Name \_\_\_\_\_ Date \_\_\_\_\_

Thank you for your participation and feedback!  
Please return your completed evaluation to your Facilitator.